## Issue Classification



| Application/Control No. | Applicant(s)/Patent Under Reexamination |
|-------------------------|---|
| 10708569                | PEART ET AL.                            |
| Examiner                | Art Unit                                |
| OLABODE AKINTOLA        | 3691                                    |

| ORIGINAL            |    |          |                     |    |  | INTERNATIONAL CLASSIFICATION |   |   |   |                  |          |  |             |  |  |  |
|---------------------|----|----------|---------------------|----|--|------------------------------|---|---|---|------------------|----------|--|-------------|--|--|--|
| CLASS SUBCLASS      |    |          |                     |    |  | CLAIMED                      |   |   |   |                  |          |  | NON-CLAIMED |  |  |  |
| 705                 |    |          | 39                  |    |  | G                            | 0 | 6 | Q | 40 / 00 (2006.0) |          |  |             |  |  |  |
|                     | CF | ROSS REF | ERENCE(             | S) |  |                              |   |   |   |                  |          |  |             |  |  |  |
| CLASS SUBCLASS (ONE |    |          | SUBCLASS PER BLOCK) |    |  |                              |   |   |   |                  |          |  |             |  |  |  |
| 705                 | 39 |          |                     |    |  |                              |   |   |   |                  |          |  |             |  |  |  |
|                     |    |          |                     |    |  |                              |   |   |   |                  |          |  |             |  |  |  |
|                     |    |          |                     |    |  |                              |   |   |   |                  |          |  |             |  |  |  |
|                     |    |          |                     |    |  |                              |   |   |   |                  |          |  |             |  |  |  |
|                     |    |          |                     |    |  |                              |   |   |   |                  | <u> </u> |  |             |  |  |  |
|                     | 1  |          |                     |    |  |                              |   |   |   |                  |          |  |             |  |  |  |
|                     |    |          |                     |    |  |                              |   |   |   |                  |          |  |             |  |  |  |
|                     |    |          |                     |    |  |                              |   |   |   |                  |          |  |             |  |  |  |
|                     |    |          |                     |    |  |                              |   |   |   |                  | 1        |  |             |  |  |  |
|                     |    |          |                     |    |  |                              |   |   |   |                  |          |  |             |  |  |  |
|                     |    |          |                     |    |  |                              |   |   |   |                  |          |  |             |  |  |  |
|                     |    |          |                     |    |  |                              |   |   |   |                  |          |  |             |  |  |  |

|       | Claims renumbered in the same order as presented by applicant |       |          |       |          |       |          | ☐ CPA ☐ T.D. ☐ R.1.47 |          |       |          |       |          | 47    |          |
|-------|---|-------|----------|-------|----------|-------|----------|-----------------------|----------|-------|----------|-------|----------|-------|----------|
| Final | Original  | Final | Original | Final | Original | Final | Original | Final                 | Original | Final | Original | Final | Original | Final | Original |
| 1     | 1   |       |          |       |          |       |          |                       |          |       |          |       |          |       |          |
| 2     | 2   |       |          |       |          |       |          |                       |          |       |          |       |          |       |          |
|       | 3   |       |          |       |          |       |          |                       |          |       |          |       |          |       |          |
|       | 4   |       |          |       |          |       |          |                       |          |       |          |       |          |       |          |
| 3     | 5   |       |          |       |          |       |          |                       |          |       |          |       |          |       |          |
| 4     | 6   |       |          |       |          |       |          |                       |          |       |          |       |          |       |          |
| 5     | 7   |       |          |       |          |       |          |                       |          |       |          |       |          |       |          |
| 6     | 8   |       |          |       |          |       |          |                       |          |       |          |       |          |       |          |
| 7     | 9   |       |          |       |          |       |          |                       |          |       |          |       |          |       |          |
| 8     | 10  |       |          |       |          |       |          |                       |          |       |          |       |          |       |          |
| 9     | 11  |       |          |       |          |       |          |                       |          |       |          |       |          |       |          |
| 10    | 12  |       |          |       |          |       |          |                       |          |       |          |       |          |       |          |
| 11    | 13  |       |          |       |          |       |          |                       |          |       |          |       |          |       |          |
| 12    | 14  |       |          |       |          |       |          |                       |          |       |          |       |          |       |          |
|       |   |       |          |       |          |       |          |                       |          |       |          |       |          |       |          |
|       |   |       |          |       |          |       |          |                       |          |       |          |       |          |       |          |

| /OLABODE AKINTOLA/<br>Examiner.Art Unit 3691    | 10/22/2008 | Total Claims Allowed: |                   |  |  |
|---|------------|-----------------------|-------------------|--|--|
| (Assistant Examiner)                            | (Date)     |                       | _                 |  |  |
| /Hani Kazimi/<br>Primary Examiner.Art Unit 3691 | 11/24/2008 | O.G. Print Claim(s)   | O.G. Print Figure |  |  |
| (Primary Examiner)                              | (Date)     | 1                     | 1                 |  |  |